COCHISE COUNTY GRANT APPROVAL FORM

Form Initiator: Mark Genz	Date Prepared: Feb 20, 2015					
Point of Contact: Mark Genz	Phone Number 4329502					
Department: Sheriff						
PRIMARY GRANT						
Primary Grantor: Sheriff's Assist Team	CFDA: www.CFDA.gov					
Grant Title: SAT Grant for Vet Care						
Grant Term From: Mar 10, 2015 To: Mar 9, 2016	Total Award Amount: 1,000					
New Grant: Yes No Grant No.: N/A						
Amendment No						
Funding No.: If new, Finance will assign a funding number.						
Strategic Plan:	District: Mandated by Law? ☐ Yes ☒ No					
Number of Positions Funded: Asset(s) Acquired:						
Briefly describe the purpose of the grant.						
The Sheriff's Assist Team is providing \$1,000 to help pay veterin the Sheriff's Office pick up.	ary bills for injured animals that the Animal Control Officers for					
If this is a mandated service, cite the source. If not mandated, cite	e indications of local customer support for this service.					

PRIMARY FUNDING SOURCE:

Funding Year:	2015	Federal Funds 332.100			
		State Funds 336.100			
		County Funds 391.000			
		Other Funds:	1,000		
		Total Funds:	1,000		
Funding Year:		Federal Funds 332.100			
		State Funds 336.100			
		County Funds 391.000			
		Other Funds:			
		Total Funds:			
Funding Year:		Federal Funds 332.100			
		State Funds 336.100			
		County Funds 391.000			
		Total Revenue:			
Has this amount been budgeted? Yes No					
Method of collecting funds:					
Is revertment of unexpended funds required at the end of grant period? Yes No					
(a) Total A-87 Cost Allocation: (b) Amount of overhead allowed by grant:					
County Subsidy (a) - (b):					
Does Grantor accept indirect costs as an allowable expenditure?					
If yes, dollar amount or percentage allowed:					

Second Grantor:				
Grant Term From: To:				
Secondary Award Amount:				
Grant No.:				
Amendment No.:				
Funding Year: Fe	ederal Funds 332.100			
St	rate Funds 336.100			
Co	ounty Funds 391.000			
Ot	ther Funds:			
Funding Year: Fe	ederal Funds 332.100			
Sta	rate Funds 336.100			
Co	ounty Funds 391.000			
Ot	ther Funds:			
То	otal Revenue:			
Has this amount been budgeted?				
Method of collecting funds: Lump Sum Quarterly Draw Reimbursement				
s revertment of unexpended funds required at the end of grant period?				
(a) Total A-87 Cost Allocation:	(b) Amount of overhead allowed by grant:			
County Subsidy (a) - (b):				
Does Grantor accept indirect costs as an allowable expenditure? Yes No				
If yes, dollar amount or percentage allowed:				

Is County match required?	
County Match Source:	
County match dollar amount or percentage:	
Signature: MP3	-
Board Approval:	Date
Print Form	
Filleroini	
Submit by Email to Finance Please e-mail completed form	n to Finance Idevore@cochise.az.gov.

NOTE: Once approved by the Board of Supervisors, the department is responsible for sending a copy of the fully executed grant document to the Finance Department